

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			8-18-99
O.I.P.E. CLASSIFIER			8-18-99
FORMALITY REVIEW			8-18-99

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	6/28/99
1	✓ ✓ ✓ ✓ ✓ ✓
2	✓ ✓ ✓ ✓
3	
4	✓ ✓ ✓ ✓
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8	✓
9	✓
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11	✓
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15	✓
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17	✓
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20	✓
21	✓
22	✓
23	✓
24	✓
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28	✓
29	✓
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34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
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48	✓
49	✓ ✓
50	✓

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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